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| PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004  |  |  |  |   |                                  |                  |   |                     | Application or Docket Number |            |                  |                        |
|--|--|--|--|---|----------------------------------|------------------|---|---------------------|------------------------------|------------|------------------|------------------------|
| CLAIMS AS FILED - PART I  (Column 1) (Column 2)                          |  |  |  |   |                                  |                  |   | SMALL ENT           | TTY                          | OR         | OTHER<br>SMALL I |                        |
| U.S. NATIONAL STAGE FEES   |  |  |  |   |                                  |                  | RATE                                    | FEE                 | li                           | RATE       | FEE              |                        |
| BASIC FEE  |  |  | SMALL ENT. = 1   | LARG                                    | E ENT. = \$ 300                  |                  | BASIC FEE                               | 150                 | ÓR                           | BASIC FEE  |                  |                        |
| EXAMINATION FEE  |  |  | Satisfies PCT Articl (4) = \$50/\$                               |   | ner situations =<br>100 / \$ 200 |                  | EXAM. FEE                               | 100                 |                              | EXAM. FEE  | <u> </u>         |                        |
| SEARCH FEE   |  |  | U.S. is ISA = \$ 50<br>ALL other countri<br>\$ 200 / \$ 400      | All other situations. = \$ 250 / \$ 500 |                                  |                  | SEARCH FEE                              | 200                 |                              | SEARCH FEE |                  |                        |
| FEE FOR EXTRA SPEC. PGS.   |  |  | minus  |   | / 50 <b>=</b>                    | l                | X \$ 125 =                              |                     |                              | X \$ 250 = |                  |                        |
| TOTAL CHARGEABLE CLAIMS  |  |  | 7 minus  | •                                       |                                  |                  | X \$ 25 =                               |                     | OR                           | X \$ 50 =  |                  |                        |
| INDEPENDENT CLAIMS   |  |  | min  | •                                       |                                  |                  | X \$ 100 =                              |                     | OR                           | X \$ 200 = |                  |                        |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM PRE                             | SENT   |   |                                  |                  |   | + \$ 180 =          |                              | OR         | + \$ 360 =       |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |  |  |   |                                  |                  | •                                       | TOTAL               | 450                          | OR.        | TOTAL            |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)            |  |  |  |   |                                  |                  | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                     |                              |            |                  |                        |
| AMENDMENT A  | 12/06  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT? |  | HIGHE<br>NUMB<br>PREVIOL<br>PAID F      | ER<br>USLY                       | PRESENT<br>EXTRA |   | RATE                | ADDY-<br>TIONAL<br>FEE       | ٠          | RATE             | ADDI-<br>TIONAL<br>FEE |
|  | Total  | . <  | Minus  | 34-20                                   | 1                                | <b>=</b>         |   | X \$ 25 =           |                              | OR         | X \$ 50 =        |                        |
|  | Independent                                    |  | Minus / *;   | ru                                      |                                  | = /              |   | X \$ 100 =          |                              | OR         | X \$ 200 =       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |   |                                  |                  |   | + \$ 180 =          |                              | OR         | +-\$ 360 =       |                        |
|  |  |  |  | •                                       |                                  |                  |   | TOTAL ADDIT.<br>FEE |                              | OR         | TOTAL ADDIT.     |                        |
|  |  | (Column 1)                                 |  | Colum                                   | in 2)                            | (Column 3)       | •                                       | · .                 |                              |            | ٠.               |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  | ·  | HIGHE<br>NUMBI<br>PREVIOL<br>PAID F     | ER<br>USLY                       | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE       |            | RATE             | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •  | Minus **   |   |                                  |                  |   | X \$ 25 =           |                              | OR         | X \$ 50 =        |                        |
|  | Independent                                    |  | Minus **   | *                                       | ·                                | E                |   | X \$ 100 =          |                              | OR         | X \$ 200 =       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |   |                                  |                  |   | + \$ 180 =          |                              | OR         | + \$ 360 =       |                        |
| TOTAL ADDIT.  FEE OR TOTAL ADDIT.  FEE                                   |  |  |  |   |                                  |                  |   |                     |                              |            |                  |                        |
| ***  | If the "Highest Nu                             | mber Previously Pak                        | entry in column 2, w<br>d For IN THIS SPAC<br>d For IN THIS SPAC | E is less                               | than '20'                        | . enter "20".    |   |                     |                              |            |                  |                        |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.